



PLEASE RETURN FORM TO:
CITY OF SEDONA
(CITY HALL)

APPLICATION/AGREEMENT FOR
RESIDENTIAL WASTEWATER SERVICE

Finance Dept. – Bldg. 106
102 Roadrunner Drive-Sedona, AZ 86336
Phone (928) 204-7185

Email: Billing@SedonaAz.Gov
Fax: (928) 282-7207

Today's Date: _____

ACCOUNT #: _____

****ALL ACCOUNTS REQUIRE A \$25.00 ACCOUNT SET-UP FEE**

****ACCOUNTS FOR RESIDENTIAL TENANTS MAY REQUIRE A \$250.00 DEPOSIT.** The \$250 deposit may be waived if you can provide a recent letter of credit from a utility company showing one year of timely and consistent payments, and a copy of your lease. This deposit will be credited to your account after one year of timely payments, or if closing your account, will be applied to your final bill.

*** ☐ Please check if this property is going to be used as a short term rental. (Business License will be required.)

CUSTOMER INFORMATION

OWNER ☐ **\$25.00 ACCOUNT SET-UP FEE (APPLIED TO YOUR FIRST BILLING)**

TENANT ☐ **\$25.00 ACCOUNT SET-UP FEE (APPLIED TO YOUR FIRST BILLING)**

\$250.00 DEPOSIT -Due with Application (if applicable). Please provide a copy of your lease.

This billing type set-up may require a "Request for Alternate Billing" form signed by Property Manager or Owner.

FIRST

MIDDLE

LAST

NAME: _____

SERVICE ADDRESS: _____

MAILING: _____

DRIV LIC # _____

PLEASE INCLUDE A COPY OF YOUR LICENSE

DATE OF BIRTH: ____/____/____

PHONE: _____

EMAIL ADDRESS: _____

START OF LEASE or CLOSE OF ESCROW DATE _____

ESCROW COMPANY: _____

By signing below, I hereby agree to pay all deposits and monthly wastewater fees for the above-described property. I also understand that by failing to make any payment, my entire deposit will be forfeited. I further agree to provide timely notice of my intent to vacate the property.

APPLICANT SIGNATURE: _____

OWNER OPTION TO ASSUME RESPONSIBILITY FOR WASTEWATER FEES AND WAIVER OF TENANT DEPOSIT:

By signing below, and in exchange for the waiver of the tenant security deposit, I as owner of the above-described property, agree to keep the wastewater account in my name, assuming full responsibility for all wastewater fees and charges that may be incurred by any tenant or myself. I also understand that if there are any delinquent wastewater fees, that a lien may be placed upon my property for the full amount due and owing.

Owner(s) Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Tel./Cell: _____

Signature of Owner: _____ Date: _____